


U.S. Department of Commerce SLIGP 2.0 Performance Progress Report				2. Award or Grant Number:	08-10-S18008
1. Recipient Name		Colorado Department of Public Safety		4. EIN:	84-0644739
3. Street Address		9195 East Mineral Avenue, Suite 200 (Main Office) 8000 South Chester Street, Suite 575 (Mailing Address-Office of Grants Management)		6. Report Date (MM/DD/YYYY)	07/27/2020
5. City, State, Zip Code		Centennial, CO 80112		7. Reporting Period End Date: (MM/DD/YYYY)	06/30/2020
				8. Final Report	9. Report Frequency
				Yes	Quarterly <input checked="" type="checkbox"/>
				No <input checked="" type="checkbox"/>	
10a. Project/Grant Period					
Start Date: (MM/DD/YYYY)	03/01/2018	10b. End Date: (MM/DD/YYYY)	03/31/2021		
11. List the individual projects in your approved Project Plan					
	Activity Type (Planning, Governance Meetings, etc.)	Was this Activity Performed during the Reporting Quarter? (Yes/No)	Project Deliverable Quantity (Number & Indicator Description)	Description of Milestone Category	
Activities/Metrics for All Recipients during the Reporting Quarter					
1	Governance Meetings	Yes	3	Actual number of governance, subcommittee, or working group meetings related to the NPSBN held during the quarter	
2	Individuals Sent to Broadband Conferences	No	0	Actual number of individuals who were sent to national or regional third-party conferences with a focus area or training track related to the NPSBN using SLIGP grant funds during the quarter	
3	Convened Stakeholder Events	No	0	Actual number of events coordinated - or held using SLIGP grant funds during the quarter, as requested by FirstNet.	
4	Staff Hired (Full-Time Equivalent)(FTE)	No	0.00	Actual number of state personnel FTEs who began supporting SLIGP activities during the quarter (may be a decimal).	
5	Contracts Executed	No	0	Actual number of contracts executed during the quarter.	
6	Subrecipient Agreements Executed	No	0	Actual number of agreements executed during the quarter.	
7	Data Sharing Policies/Agreements Developed	No		Yes or No if data sharing policies and/or agreements were developed during this reporting quarter.	
8	Further Identification of Potential Public Safety Users	No		Yes or No if further identification of potential public safety users occurred during this reporting quarter.	
9	Communications	No		Yes or No if plans for future emergency communications technology transitions occurred during this reporting quarter.	
10	Transition PS Apps & Gaps	No		Yes or No if public safety applications or databases within the State or territory were identified and transition plans were developed this	
11	Gaps	Yes		Yes or No if participated in identifying ongoing coverage gaps using SLIGP funds during this reporting quarter.	
12	Data Collection Activities	No		(Opt-In and Opt-Out Post-SMLA Phase Only) Yes or No if participated in data collection activities as requested by FirstNet or following a	
Activities for Opt-Out States only in the Pre-SMLA Phase during the Reporting Quarter					
13	Stakeholders Engaged			Actual number of individuals reached via stakeholder meetings or events during the quarter.	
14	Education and Outreach			Actual number of materials distributed in-person during this quarter.	
15	Education and Outreach			Actual volume of hits or impressions to any website, e-newsletter, social media post, or other account supported by SLIGP during the	
11a. Narrative description for each activity reported in Question 11 for this quarter; any challenges or obstacles encountered and mitigation strategies you have employed; planned major activities for the next quarter; and any additional project					
The Colorado Broadband Office (CBO) had three governance stakeholder meetings with the Public Safety Communications SubCommittee in this quarter. Additionally, the CBO has completed the work associated with the procurement process through OIT for the crowd-sourced AT&T data which cost a total of \$50,000.00. All other activities and meetings planned for Q2 of 2020 have been cancelled due to the COVID-19 pandemic crisis.					
12. Personnel					
12a. Staffing Table - Please include all staff that have contributed time to the project with current quarter's utilization. Please only include FTE staff employed by the state not contractors. Please do not remove individuals from this table.					
Job Title	FTE%	Project (s) Assigned		Change	
DHSEM Grant Manager	15%	Grant Manager responsible for reporting activities and overall management of the grant.		Assuming both Mgr & Specialist assignments	
DHSEM Grant Specialist	15%	Grant Specialist supporting the responsibilities of grant management and compliance between State Agencies and Program and Fiscal.		Promoted to Mgr	
Grant Accountant	20%	Grant Accounting responsibilities of the grant.		No Change	
Outreach & Education Mgr	30%	Grant support of allowable activities in daily interaction with stakeholders.		No Change	
Project Mgr	33%	Grant support of allowable activities of logistical efforts and data.		No Change	
Broadband Implementation Mgr	24%	Grant support of allowable activities with the SPOC and Statewide governing body		No longer with CBO	

13. Contractual (Contract and/or Subrecipients)									
13a. Contractual Table – Include all contractors. The totals from this table should equal the “Contractual” in Question 14f.									
Name	Subcontract Purpose	Type (Contract/Subrec.)	RFP/RFQ Issued (Y/N)	Contract Executed (Y/N)	Start Date	End Date	Total Federal Funds Allocated	Total Matching Funds Allocated	
Signals Analytics (Professional Services)	Coverage gap data collection	Contract	Y	Y	10/15/2018	03/31/2019	\$30,000.00	\$0.00	
Solutelia (Handheld Solution)	Coverage gap data collection	Contract	Y	Y	10/16/2018	12/31/2019	\$43,065.00	\$0.00	
Wireless Advanced	Coverage gap data collection	Contract	Y	Y	11/01/2018	12/31/2019	\$25,375.00	\$0.00	
OC for third party M&I Crowd	Coverage gap data collection	contract	Y	Y	01/01/2020	12/31/2020	\$50,000.00	\$0.00	
	Analysis & creation of data sharing policies	Contract	N	N			\$75,000.00	\$0.00	
	Technology interface and integration	Contract	N	N			\$67,500.00	\$0.00	
	Validate data from old system into new system	Contract	N	N			\$11,250.00	\$0.00	
13b. Narrative description any challenges, updates, or changes related to contracts and/or subrecipients.									
There are no changes, challenges, or updates to the two contracts in process for the Coverage Data Analysis.									
14. Budget Worksheet									
Columns 2, 3 and 4 must match your current project budget for the entire award, which is the SF-424A on file. Only list matching funds that the Department of Commerce has already approved.									
Project Budget Element (1)	NTE Total Federal Funds Approved (2)	NTE Total Matching Funds Approved (3)	NTE Total Budget (4)	Federal Funds Obligated to Date (5)	Matching Funds Approved to Date (6)	Total Budget to Date (7)	Federal Funds Expended (8)	Approved Matching Funds Expended (9)	Total funds Expended (10)
a. Personnel Salaries	\$72,802.00	\$133,650.00	\$206,452.00	\$72,802.00	\$133,650.00	\$206,452.00	\$70,900.95	\$60,934.69	\$131,835.64
b. Personnel Fringe Benefits	\$24,024.00	\$41,350.00	\$65,374.00	\$24,024.00	\$41,350.00	\$65,374.00	\$21,530.16	\$20,108.35	\$41,638.51
c. Travel	\$47,548.00	\$0.00	\$47,548.00	\$47,548.00	\$0.00	\$47,548.00	\$25,283.26	\$0.00	\$25,283.26
d. Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
e. Materials/Supplies	\$14,000.00	\$0.00	\$14,000.00	\$14,000.00	\$0.00	\$14,000.00	\$2,109.26	\$0.00	\$2,109.26
f. Contractual	\$447,626.00	\$0.00	\$447,626.00	\$447,626.00	\$0.00	\$447,626.00	\$146,823.32	\$0.00	\$146,823.32
g. Other	\$94,000.00	\$0.00	\$94,000.00	\$94,000.00	\$0.00	\$94,000.00	\$3,125.09	\$0.00	\$3,125.09
h. Indirect	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
i. Total Costs	\$700,000.00	\$175,000.00	\$875,000.00	\$700,000.00	\$175,000.00	\$875,000.00	\$269,772.04	\$81,043.04	\$350,815.08
j. Proportionality Percent	80.00%	20.00%	100.00%	80.00%	20.00%	100.00%	76.90%	23.10%	100.00%
15. Certification: I certify to the best of my knowledge and belief that this report is correct and complete for performance of activities for the purpose(s) set forth in the award documents.									
16a. Typed or printed name and title of Authorized Certifying Official: Larisa Cannon DHSEM Grants and Contracts Manager						16c. Telephone (area code, number, and extension) 303-239-4183			
16b. Signature of Authorized Certifying Official: 						16d. Email Address: Larisa.Cannon@state.co.us			
						Date: 07.30.2020			

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